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Note: Use of this form constitutes practice of law and is limited to practicing lawyers.

Form No. 11

CHICAGO TITLE INSURANCE COMPANY  
INDIANA DIVISION

830382

POWER OF ATTORNEY

I, Marilyn J. Hyde, of Lee County, State of Florida, do hereby designate Charles A. Hyde, of Lee County, State of Florida, my true and lawful attorney in fact, or agent, to have the following powers:

(Select or add appropriate provision)

- ~~to make, draw and indorse promissory notes, checks or bills of exchange and to waive demand, presentment, protest, notice of protest, and notice of non-payment of all such instruments;~~
- ~~to make and execute any and all contracts;~~
- ~~to purchase, sell, dispose of, assign and pledge notes, stocks, bonds and securities and to exercise such voting rights as my ownership of any notes, stocks, bonds and securities may entitle me, either in person or by proxy;~~
- ~~to represent me in all matters pertaining to the business of any corporation in which I may have any interest;~~
- ~~to receive and to demand all sums of money, debts, dues, accounts, bequests, interest, dividends, and demands whatsoever which are now or shall hereafter become due or payable to me and to compromise or discharge the same;~~
- ~~to bargain for, contract concerning, buy, sell, mortgage and in any and every way and manner deal with personal property of any kind or nature;~~
- ~~to execute instruments to effect the transfer of title to any motor vehicle owned by me;~~
- ~~to execute and file tax returns;~~
- to purchase, sell, mortgage, convey and lease any interest in real estate, wherever located, of which I may be owner now or hereafter;

The East 70 feet of Lots Nine (9) and Ten (10), Block Two (2), Jansen's Oak Grove Addition to Griffith as shown in Plat Book 22, page 19, in Lake County, Indiana

910 E. Oak Street, Griffith, Indiana

#216-79-12

and I hereby ratify and confirm all that my said attorney in fact or agent shall do by virtue hereof.

I hereby reserve the right of revocation; however, this Power of Attorney shall continue in full force and effect until:

(Select or add appropriate provisions)

- (A) I have executed and recorded in the Recorder's Office of the county of my domicile a written revocation hereof.
- (B) The \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.
- (C) \_\_\_\_\_

I further state that:

(Select appropriate provision)

- (1) This Power of Attorney shall not be affected by my incompetence.
- (2) This Power of Attorney shall become effective upon my incompetence.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, this 13<sup>th</sup> day of November, 19 85.

FILED  
Signature Marilyn J. Hyde  
Printed Marilyn J. Hyde

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD  
NOV 25 11 24 AM  
RUDOLPH H. STAY  
RECORDER

NOV 22 1985

STATE OF Florida }  
COUNTY OF Lee } SS:

John O. ...  
AUDITOR LAKE COUNTY

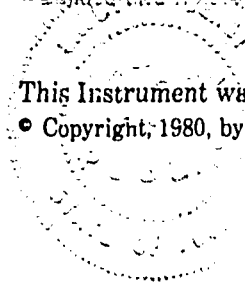
Before me, a Notary Public in and for said County and State personally appeared Marilyn J. Hyde, who acknowledged the execution of the foregoing Power of Attorney.

WITNESS my hand and Notarial Seal, this 13<sup>th</sup> day of November, 19 85.

My commission expires at Large, State of Florida at Large.  
X My Commission Expires Oct. 1, 1989.

Signature Sally A. West  
Printed Sally A. West  
Residing in Lee County

This Instrument was prepared by Lowell E. Enslin, Attorney at Law  
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